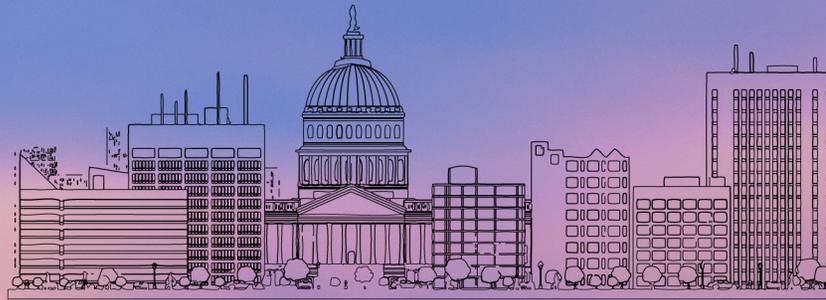


The BOISE



February 2022

FRONT

The official newsletter of the Boise VA Medical Center



We are very proud to announce Kristine Theis, FNP, MSN is being honored by the American Association of Nurse Practitioners® (AANP) as the 2022 recipient of the AANP State Award for Excellence in Idaho.



In recognition of her contribution as an advocate on behalf of nurse practitioners (NPs) and their patients, Kristine Theis, FNP, MSN is being honored by the American Association of Nurse Practitioners® (AANP) as the 2022 recipient of the AANP State Award for Excellence in Idaho. Each year, health care professionals across the nation are nominated by their colleagues to receive this prestigious award.

Ms. Theis has been a Nurse Practitioner at the Boise VA Medical Center for 29 years and is currently transitioning into a new role working for the VISN 20 Telehealth Hub. She has been a career-long advocate for NP's and has worked to educate private, public, and legislative stakeholders about NPs and their patient-driven care potential for Idaho. She has worked to remove barriers from NP practice that would help to increase access to care for those especially in rural areas. Throughout these years of statewide NP advocacy, Kristy has worked in full-time leadership positions at the Boise VA- providing excellent care for Veterans and has helped to bridge the gap between mental health and primary care, especially in the area of Substance Use Disorders. She is involved nationally as a member of the VA's Office of Nursing Service Mental Health Field Advisory Committee since 2011. She serves as a mentor and exemplary role model for Nurse Practitioners and advocates for NP colleague salary, positions, and scope of practice issues. She has several publications, awards, and other achievements locally and nationally; she feels grateful and is looking forward to contributing more in the future. As a 2022 AANP State Award for Excellence recipient, she will be honored during the 2022 AANP National Conference in Orlando, Florida in June, 2022.

The AANP State Award for Excellence was established in 1993 and is given to an NP in each state who demonstrates excellence in clinical care. In 1993, the state award for NP advocates was added to highlight the efforts of individuals who have made a significant contribution toward increasing the awareness and recognition of NPs. Awards are distributed to the recipients throughout the year, with recipients honored during the annual AANP national conference. AANP is the largest professional association for NPs of all specialties, with more than 119,000 members and headquarters in Texas and Washington, D.C.



Compliance Corner March Madness - Gambling Prohibitions

Every March, the National Collegiate Athletic Association (NCAA) holds its Division I Men's Basketball Tournament, known as March Madness®. The NCAA basketball tournament is among the most popular sporting events to bet on; the NCAA estimates 1 in 10 Americans will fill out a bracket, and many do so as part of office pools.

However, federal rules prohibit employees from gambling while on duty, or while on government-owned or leased property, even if it's just spending a few bucks on a friendly office bracket. These restrictions apply not only to federal employees, but also to members of the public at large, contractors, vendors and exhibitors when on GSA-controlled property (5 C.F.R. § 735.201; 41 C.F.R. § 102-74.395). State laws may also prohibit gambling activities.

Furthermore, with so many VA employees teleworking from home, under VA's Limited Personal Use of Government Office Equipment policy (VA Directive 6100), use of Government office equipment for illegal activities such as gambling is always prohibited.

Even if your participation in March Madness® is not considered gambling (let's say you are simply picking winners to claim bragging rights), limited personal use of Government property is only permitted where the activity occurs on non-duty time, does not interfere with official business (including video streaming on IT networks), and the expense to the Government is negligible.

Generally, gambling requires three elements:

- A game of chance;
- Payment of consideration for the opportunity to play the game; and
- An offering of a prize (even if donated to charity).

A "game of chance" includes, but is not limited to, a raffle, lottery, sports pool, game of cards, the selling or purchasing of a numbers slip or ticket, or any game for money or property.

"Consideration" includes a participation fee, a wager of money, and something of value in return for the possibility of winning a reward or prize. A "prize" would include a monetary award, or a tangible or intangible item. Examples include meals, drinks, gift certificates, tickets to events, or cash.

Violations of these prohibitions may be cause for disciplinary action, in addition to any other penalties prescribed by law. Therefore, the best course of conduct is to avoid any March Madness® office pools or workplace activity that involves gambling on the outcome of a game or the misuse of Government resources.

Employees and veterans are encouraged to speak up if something isn't right or if they need guidance about an ethical concern or question about compliance. You can contact me at 208-422-1267 / Deborah.reinhart@va.gov or call the OIC Helpline at 866-842-4359. For guidance on ethical decisions related to patient care contact the Ethics Consultation Team at BOIEthicsConsult@va.gov.

COMPLIANCE CORNER



BOISE is HIGHLY RELIABLE

HRO PRINCIPLES & VALUES

THEME OF THE MONTH
Preoccupation with Failure

February 2022 | National Safety Poster

Quiet Zone Solution

C

CONTEXT

Specialty Care Nurses at the Eugene Health Care Center, part of the Roseburg VA Health Care System, identified a safety risk. Nurses were frequently distracted and interrupted while pulling and mixing medications. This created unnecessary risk of a medication error.

A

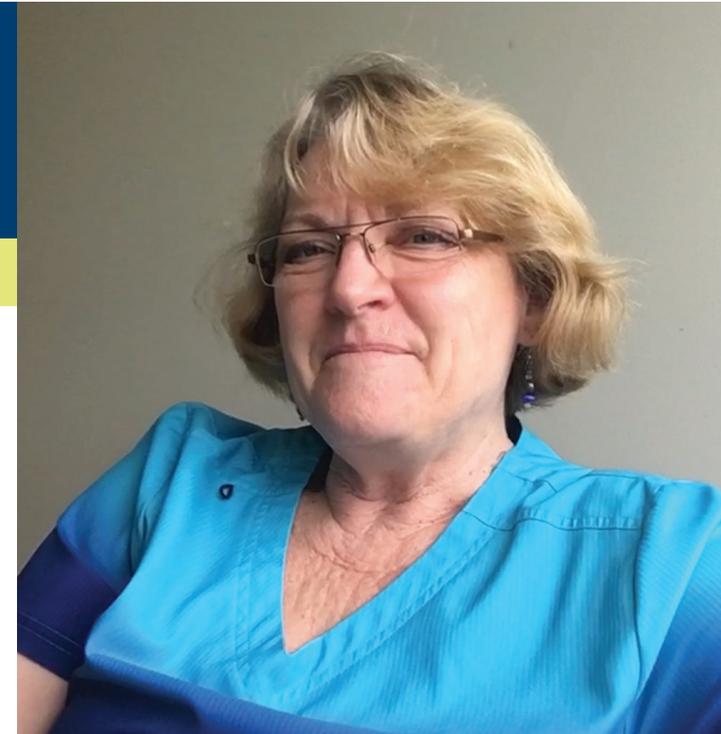
ACTION

Shortly after attending Clinical Team Training, nurse Mary Carroll took the lead on a project to proactively reduce risk. Employing a Preoccupation with Failure, she placed "Quiet Zone" signage on the medication room door to remind staff members of the risk to patient safety that distraction and interruption can pose.

R

RESULTS

Prior to implementation, the project was presented to and approved by the Specialty Unit Based Council. Data collection helped to analyze the impact of the problem. Twelve weeks after implementation of the signage, the incidence of interruptions in the medication room decreased from an estimated 25 percent to only four percent.



We were able to significantly reduce the risk of medication errors by reducing the interruptions in our medication room before any patient incidents occurred.

Mary Carroll, BSN, RN

Specialty Care Nurse

Eugene Health Care Center, Roseburg VA Health Care System

VA



U.S. Department
of Veterans Affairs

For more information, visit: http://bit.ly/HighReliability_sp

VHA'S JOURNEY TO
HIGH
RELIABILITY

Your Care is Our Mission.

SUGGESTED TIP:



(800) 799-0060

The phone number the VA uses to send emergency alerts to staff is (916) 692-7500.

Please create a contact in your phone(s) and label it 'VA EAAS' or 'VA Alerting System', etc. so you don't mistake the call as SPAM.

Thanks.



PRACTICING INCLUSIVE CARE:

Tips for healthcare providers and allied healthcare professionals

The practice of Inclusive Care recognizes that many of you are already engaged in many elements of this approach to care. You have invited the Veteran's caregiver into the exam room, you have recognized the healthcare interventions they provide to their Veteran, and you have noted your appreciation for their work and commitment.

A goal for the Campaign for Inclusive Care is to standardize this approach to care across every VA facility in the country with every healthcare professional. As we work to address process and system challenges that range from privacy directives to expanding the EMR to allow for caregiver encounters, there are actions we can take now to implement Inclusive Care. These actions rest on the notion that the Campaign for Inclusive Care is seeking to shift a cultural transformation in the VA and to recognize that the Veteran's caregiver is an asset and ally in care. As with any cultural transformation, it will only be sustained by recognizing implicit and explicit biases against caregivers and working to shift attitudes, knowledge, and behavior among our healthcare providers and caregivers; supported by tools, ongoing education, and ultimately, adjustments to current procedures and policies.

Inclusive Care is informed by patient and family-centered care, the Institute for Healthcare Improvement's Triple Aim, and shared decision-making practices. In reviewing these practices, we took note that despite a great deal of evidence that implementation of these practices increased healthcare provider – patient and family trust, decreased adverse medical events, and improved quality of work and life for the patient, the caregiver, and the healthcare provider, these practices are not the norm. As we set out to design and implement Inclusive Care, we are mindful of the disconnects between these research-based approaches and business as usual.

As a reminder, exclusion of the Veteran's caregiver in clinical treatment decisions disempowers the caregiver – who is providing care outside of the clinic, reduces healthcare provider access to valuable insights of the Veteran's health by the caregiver, and ensures that any encounters between the healthcare provider and caregiver are fraught. The caregiver's ability to trust the healthcare provider, feel confident that their concerns about the patient's health are taken seriously, and see their ideas integrated into the care plan will help the healthcare provider create plans that are more likely to be adhered to in the long-term.

Having understood the "why" of the Campaign for Inclusive Care by participating in the Academy for Inclusive Care and familiarizing yourself with the burdens caregivers experience in their journey as outlined in the Caregiver Journey Map, the Rand Report on Hidden Heroes, and reviewing the Campaigns Quality Improvement efforts, we now share some tips on the "how" of Inclusive Care.





10 ITEM CHECKLIST FOR INCLUSIVE CARE

<input type="checkbox"/> Before you enter the room	<ol style="list-style-type: none">1. Review the patient record with your team2. Familiarize yourself with presenting issues and recent history
<input type="checkbox"/> Invite the caregiver into the conversation	Consider: Ask the Veteran if they have someone helping them, if they accompanied them to the visit and if the caregiver should be invited into the room.
<input type="checkbox"/> Identify and greet everyone in the room, make introductions by name. Smile and make eye contact.	Identify who you are by name and your role at the facility, acknowledge everyone in the room. Confirm again that it is okay with the Veteran and the caregiver to be discussing the Veteran's care today.
<input type="checkbox"/> Inform everyone in the room of the visit's purpose	Share with everyone what the purpose of today's visit is and what you hope to learn from them about the course of treatment.
<input type="checkbox"/> Ask Questions	Throughout your time with the Veteran and the caregiver, pause, make eye contact and ask if anyone has any questions. You might also ask the caregiver questions like: <ol style="list-style-type: none">1. What are your fears about your Veteran's condition?2. What would you like to discuss today?
<input type="checkbox"/> Learn more about the caregiver	Acknowledge the role the caregiver has taken on and express gratitude.
<input type="checkbox"/> Conduct your clinical exam	Throughout the exam, explain what you are doing and why.
<input type="checkbox"/> Discuss your findings and next steps	Review the roles and tasks (current and future) the caregiver is performing, make sure the caregiver is comfortable with these roles and ask if they have questions or concerns. Encourage the caregiver to share any barriers to the tasks and work to identify solutions.
<input type="checkbox"/> Confirm next steps	To ensure that the caregiver and the Veteran understand next steps, ask them what questions or concerns remain. Hand the Veteran and the caregiver your card. Let them know they can contact you with questions.
<input type="checkbox"/> Refer, if you have concerns about caregiver capacity	If you have concerns about the caregiver's capacity to manage care outside of the facility, make a warm referral to Social Work or Caregiver Support Program. Inform the caregiver as to why you are doing this and what they can expect, next.

Give blood.

Every 2 seconds someone
in the U.S. needs blood.

American Red Cross



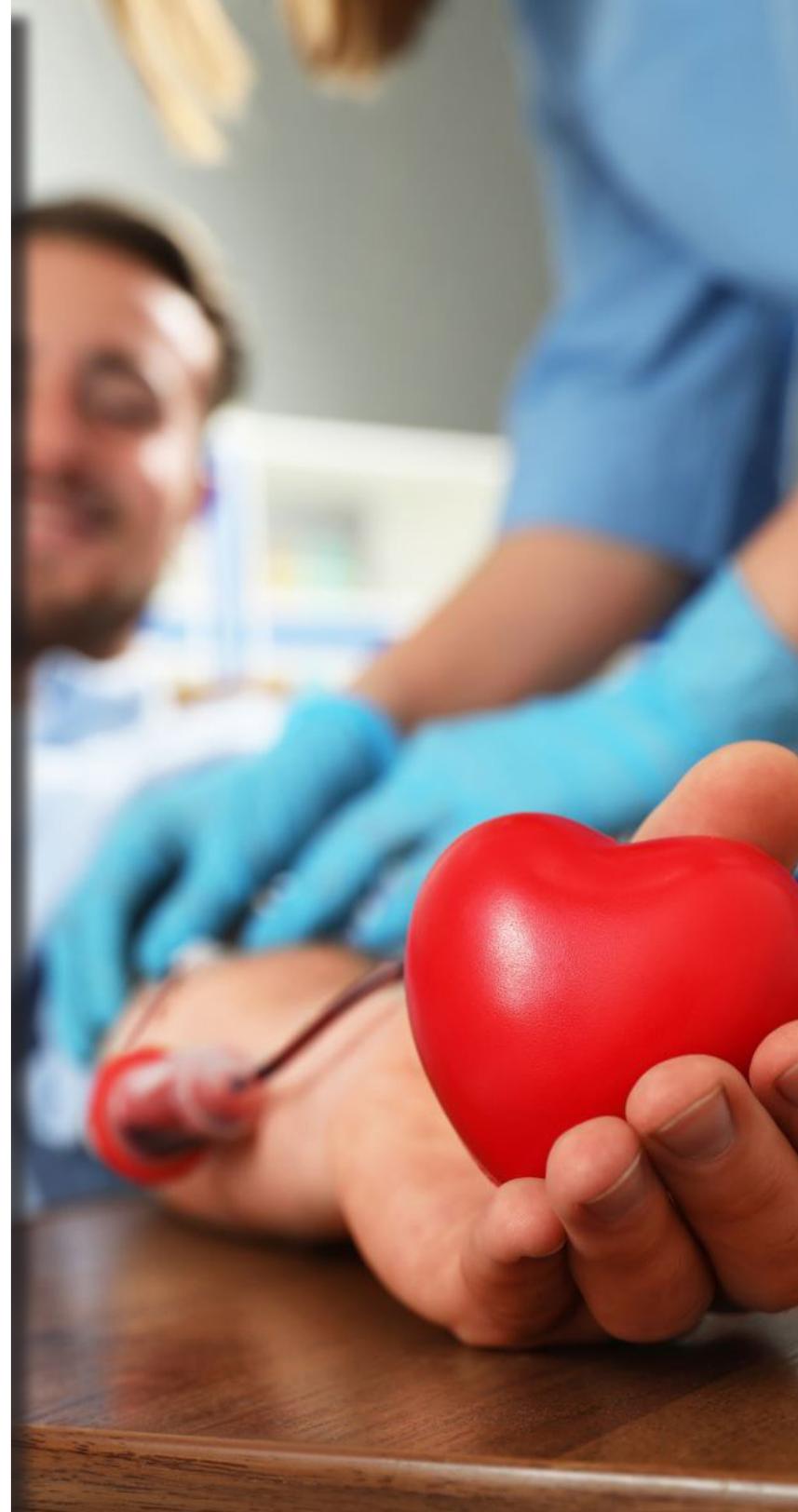
Blood Drive
Boise Veterans Administration
Medical Center

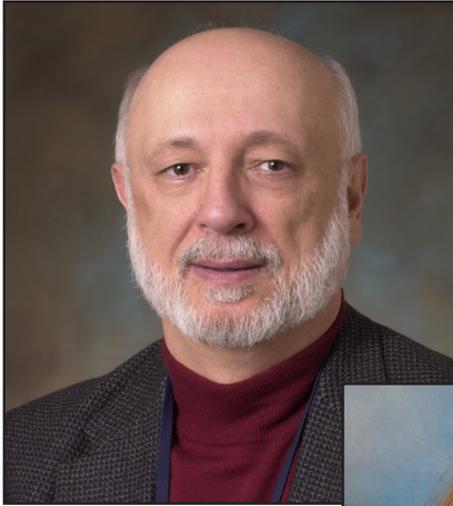
VA Gym in Building 119
911 Mountain Cove Rd.
Boise, ID 83702

Tuesday, March 29, 2022
8:00 a.m. to 2:00 p.m.

Schedule online at www.redcrossblood.org
Sponsor code: BVA
Or contact Cheryl Ross (208) 422-1000 ext 7778

**Come give blood in March and get a \$10 e-gift card,
from our partners at Fanatics! PLUS, get a chance to
win a trip to the 2022 MLB All-Star Game in LA,
including round-trip airfare and 4-night hotel
accommodations for 2! See rcblood.org/team for
details.**





GOOD CATCH AWARD



Congratulations Dr. Blaze Sekovski and Lisa Schlosser for the January Good Catch award!

A 77-year-old gentleman with a history of dementia that was taken by EMS to a hospital in the community with a chief complaint of altered mental status and weakness. After being evaluated in the ED, he was transferred to the BVAMC and admitted to the SDU.

The Patient transfer packet included an EKG monitor strip that showed complete heart block. Based on that monitor strip, the inpatient medicine team placed a Cardiology consult to evaluate patient for pacemaker implantation.

Dr. Sekovski rounded on the patient and noticed a discrepancy between the time stamp on the EKG monitor strip and the ED paperwork. He found out there was another patient in the same ER room seen earlier that day that had a diagnosis of complete heart block and wrong patient sticker was placed on that rhythm strip.

Had Dr. Sekovski not caught the time stamp discrepancy, the patient would have likely had a pacemaker device implant. Lisa Schlosser recognized the Good Catch and reported it in JPSR.

Awesome Catch Dr. Sekovski and Lisa Schlosser! Thank you so much for keeping the safety of our veterans at the forefront of your daily work. It does not go unnoticed!



Spend time outdoors to get vitamin D

MAKE YOUR BONES AS STRONG AS YOUR SPIRIT



Use weights when exercising or walking



Eat a diet rich in nutrients like calcium

1 in 5 women over age 50 are affected by osteoporosis, a disease that causes bones to weaken and break easily. Talk to your VA health care provider about your risks and getting screened.



Have an active and tobacco free lifestyle

Women Veterans Call Center: 1-855-829-6636
www.womenshealth.va.gov | #WomenVets



Coding Connection



“OTHER PNEUMONIA” 101

J18.8 “Other Pneumonia, Unspecified Organism” is truly for Pneumonia related/due to another condition that doesn’t have its own specific Pneumonia diagnosis. Documentation and diagnosis must truly reflect that the Pneumonia is related to another condition. If not the correct diagnosis to use would be J18.9 “Pneumonia, unspecified organism”.

There is a specific diagnosis for Pneumonia due/related to COVID which is J12.82. When using this, code COVID U07.1 as primary.

ASSUMED RELATIONSHIP DIAGNOSIS CODING

CKD has an assumed relationship with both HTN and DM, and CHF with HTN (Unless stated otherwise in the documentation). When addressing both CKD and/or CHF with HTN and/or DM please code accordingly using the examples below.

HTN + CKD (Stages 1-4) = I12.9

HTN + CKD (Stage 5/ESRD) = I12.0

HTN + CHF = I11.0

HTN + CHF + CKD (1-4) = I13.1

HTN + CHF + CKD (5/ESRD) = I13.2

DM1 + CKD = E10.22

DM2 + CKD = E11.22

Remember to code and document CKD for the current stage. Do not code as N18.9 (Unspecified) unless you do not have any reference for the CKD stage.

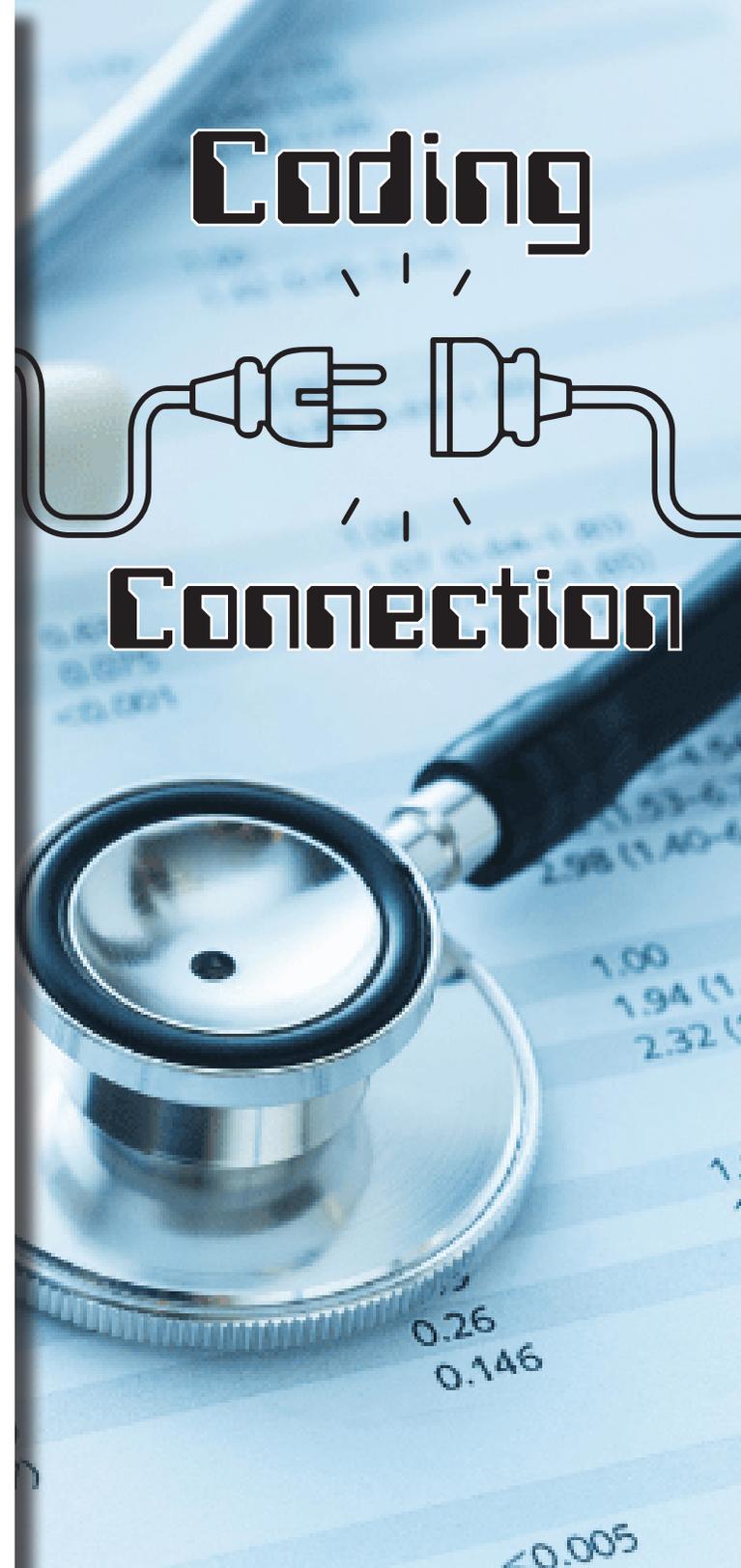
Please don't hesitate to contact me if you have any questions about these coding topics and how to support them with your documentation.

Brooke Horlocher, CPC

MRT-Coding Auditor

brooke.horlocher@va.gov

208-422-1000 X4435





National Social Work Month

www.NationalDayCalendar.com

This March we celebrate National Professional Social Work Month. This year's theme is, "The Time is Right for Social Work." This theme underscores the contributions social workers have made to this nation for more than a century and how the mission critical interventions and programming facilitated by VA Social Workers and Social Work Trainees are needed more than ever. Social Workers continue to address social injustices and inequality, address on-going challenges related to the COVID-19 pandemic and advocate for health equity for all.

Social workers have been an integral part of our nation for decades. Social workers played key roles in the Civil Rights

and Women's Rights movements and pushed for social programs we now take for granted, including the minimum wage, a 40-hour work week, Social Security and Medicare.

The VA Social Work workforce includes over 17,000 masters prepared social workers. Our workforce trains over 1,500 social workers annually. VA Social Workers are leaders, clinicians and researchers integral to programming (clinical and administrative) across VA's continuum. Social Workers ensure that Veterans, families, caregivers and loved ones are able to access resources and interventions to improve health and well-being in core social determinants of health domains

such as access to care, economics, housing, social support, psychological status and functional status.

Here at the Boise VA Medical Center, Social Workers provide a wide array of services including therapy and crisis intervention in Integrated Care and the ER, behavioral health clinics, residential and outpatient substance use treatment, the inpatient psychiatric unit, community based outpatient clinics, and suicide prevention. In addition, Social Workers are key players in discharge planning and case management for Veterans in both inpatient and outpatient medical and behavioral health settings. Social Workers actively assist Veterans and caregivers to access resources that can ease the strain for aging Veterans, help Veterans to better cope with illness, and live their lives with the dignity that they deserve. Social Workers provide current evidence-based treatment to Veterans experiencing PTSD, substance abuse,

and other mental health concerns at various levels ranging from outpatient care to residential treatment. They advocate to ensure equal rights for all Veterans accessing care at the Boise VA and in the community. Boise VA Social Workers are involved in many committees across campus, in the community, and volunteer to provide clinical supervision and mentoring to social work interns in order to give back to their field. Social Workers help Veterans and families experiencing homelessness to find safe and suitable housing options. They also provide education and advocacy to Veterans experiencing legal problems. Across all areas and in all facets of the Boise VA, the need for Social Workers is great, and the time is always right for social work.

Please join in celebrating the contributions of social workers during National Social Work Month!



THE TIME IS RIGHT
FOR SOCIAL WORK

NAMPA NATIVE BRINGS MEDICAL TRAINING HOME

It's an age-old story: when you grow up in Idaho with big-city dreams, you can't wait to get out. Then you see what else is out there and can't wait to get back.

Growing up in the suburbs of Caldwell and Nampa, Brycin Hanslits, MD, took for granted the daily beauty and peaceful surroundings. He had big plans; move to the city, study music, enjoy roasting coffee and never come back to Idaho. Instead, he found himself coming full circle after obtaining a medical degree at University of Michigan and returning home for specialized training in psychiatry with his sights set on changing the way Idaho writes laws that govern treatment of the mentally ill.

It wasn't a straight path that led him back home, but one driven by passion and life experience.

Hanslits, a first-year intern in the UW Boise Psychiatry Residency, found a love for medicine in what some may consider an odd place, coffee. While studying music at Concordia University in Portland, Oregon, he began working in the coffee roasting industry and translated an interest in the chemistry of coffee to a fascination with biochemistry. 3-years after completing a B.A. in Music, he took a single course on the subject.

"It answered so many questions about the world," he said.

At the same time, he was working on a music

project that had him volunteering with surgical oncology patients helping them to tell their stories through a music-based podcast they could leave for their loved ones.

"It was just this kind of random mashup of doing something I really enjoyed in a clinical environment and having some exposure to science that made me really excited," he explained.



Brycin Hanslits, MD
First-year Psychiatry Resident

When his then girlfriend, now wife, got accepted to graduate school in Michigan he found an opportunity to reorient his path. In a packed car on a full day drive from Oregon to Michigan, he made the decision to enroll in a program that would allow him to complete med-school prerequisites in just one year and be ready for enrollment in University of Michigan School of Medicine in 2017.

So, with a catalyst of coffee and the inspiration of a clinical and musical mashup, he embarked on his new career path thinking he would likely peruse internal medicine followed by hospice or palliative care in the end. But, once again, he found inspiration in his own experiences.

Immediately after his internal medicine course came his psychiatric training where he felt the preverbal click.

"Oh, these are my people. I loved the patients because they were just like the people I'd been working with for the last 8 years," he said. "I knew how to relate to people going through serious mental illnesses, which a lot of medical students don't ... It's a very different skill set than a lot of medicine and I was so fortunate with my work history that I had already built up a lot of that background."

From the age of 16, Hanslits had worked with people who had psychiatric diagnosis either in the vocational rehab service in Nampa where he spent after-school hours and

summers of his formative years working with individuals with developmental disabilities or at his first jobs after college working in a group home for adolescents and running the music component of their day program.

While finishing up his medical degree in Michigan, during a chance conversation with a fellow student who had just accepted a job in, of all places, Nampa, Idaho, he learned that his home state had just opened applications for its first class of psychiatric residents.

"I knew I would get a really high-level education," he said. "One that is filtered through an elite university but then I get to do all of my clinical stuff with the people that I grew up with," he said about the University of Washington program that in past years would have required he spend two years in Seattle. "That's one of the things I found when I lived in Michigan. Interestingly, it was not as natural for me to interact with people. You know, we didn't grow up doing the same stuff and going to the same places so it's just funny how being back home makes it a lot easier to interact with people who have had similar experiences to you. And, I think that is especially valuable in psychiatry when you have to talk about a lot of delicate stuff. So, for me that was a huge draw to come here."

Another draw to the program was Forensic Psychiatry Director Dr. Camille LaCroix, MD, FAPA.

Hanslits explained that forensic psychiatry, the area of the discipline that looks at the intersection between mental health treatment and the law, was a particular interest. He had seen firsthand that a lot of psychiatric patients are on the margins of society and are more likely to obtain treatment through the justice system than by seeking out a mental health provider.

"Looking at what that treatment looks like and what is fair for our patients, I think those kinds of issues really interested me and that is something I hope to continue to work on."

With a growing excitement about moving back to Boise for his psychiatric education, he reached out to Dr. LaCroix and engaged in a discussion about work he was doing regarding assisted outpatient treatment laws – basically a way to say forced outpatient treatment as opposed to involuntary inpatient commitment. Dr. Hanslits had been looking at laws in other states that allowed psychiatrists to involuntarily commit a patient to a legally monitored outpatient medication regimen.

"Obviously very controversial. And there are lots of different sides to these laws and how they are passed," he said.

Dr. LaCroix, who now serves as his faculty advisor, encouraged him to pursue that interest indicating that there was more work to be done in forensic psychiatry in the state of Idaho than there were psychiatrists to do it.

"To hear a professional in the field that I'm wanting to go into say 'where you're from needs this' was really encouraging to hear," Dr. Hanslits said.

Dr. Hanslits will complete his four-year psychiatric residency with graduation set for June of 2025. He and his wife just purchased a home in the area and plan to plant roots in the state. With a lack of training opportunities for forensic psychiatrists, he will likely need to leave once more to pursue his fellowship education but is excited about the unique, native perspective he will be able to bring to the treatment of mentally ill in the area.

"There's a big stigma in Idaho surrounding mental health and seeking out help. Right now our justice systems and mental health systems are still pretty siloed and there's just a lot more work that can be done," he said.

Story written by: Heather Gula, Program Administrator UW Boise Psychiatry Residency Addiction Medicine Fellowship

DRIVERS WANTED

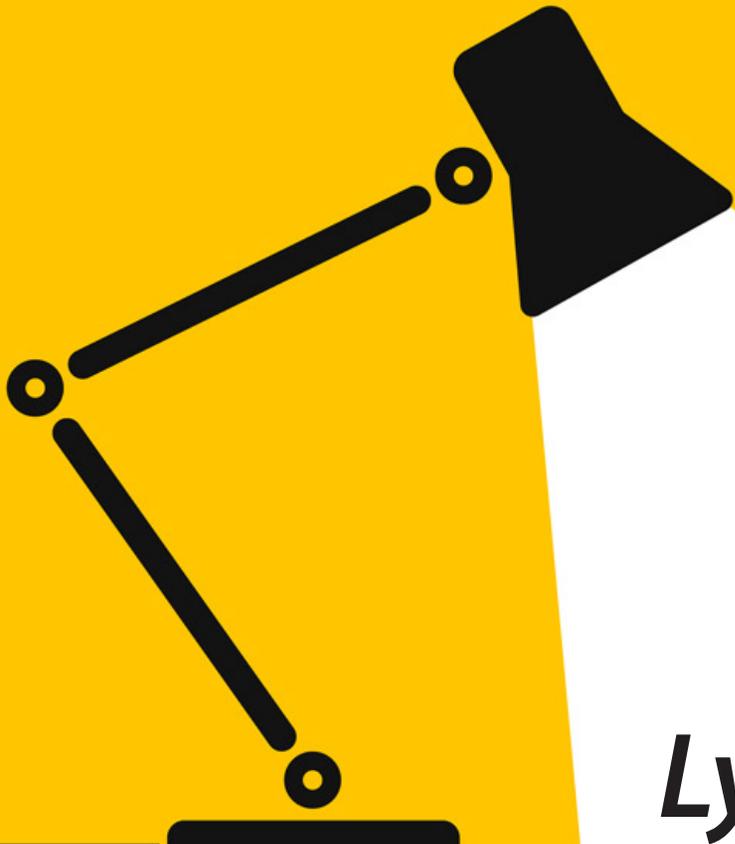
If you know someone who would like to be a volunteer driver for the Boise VA please refer them to the Volunteer Office at (208) 422-1176.



VA

Boise VA
Medical Center

VOLUNTEER SPOTLIGHT



Lynda Benson



I am not a veteran. My sons are in the military, their father, grandfather, and numerous other relatives were. I volunteer because of their service.

I'm a native Idahoan, although I have lived in other places. While living away, my heart was always here, and there's no where else I would rather be.

I've had two separate careers, first in administrative support (25 years), and then teaching at the post secondary level (20 years).

I have found, that for me, the common thread was interacting with people, which gives me a lot of enjoyment.

I've been lucky to have enjoyed traveling over the years, seeing a lot of this country and places in Europe. I've always been a reader. I enjoy my time with my friends. But my greatest joy is spending time with my family. I have two amazing and successful sons who are married to beautiful accomplished women. They have given me six wonderful

grandchildren who are the light of my life! I'm also grateful for the fact that my mom is still with me. She will be celebrating her 96th birthday in a few months.

I volunteer at the VA Hospital because it is the best "job" I've ever had. I get to interact with people, and I feel that I am able to help make others' days a little easier. I consider that a great gift at this point in my life.

I started volunteering in June 2015. In that time, I have primarily

worked as a volunteer escort. I've also served as a shuttle van driver and occasionally as a chaperone. Serving veterans by helping them navigate through the hospital is my favorite part of my time here. I love hearing the veterans' stories, enjoy exchanging laughs with them, and sometimes being able to offer a small measure of comfort when they need it. I can't think of another volunteer opportunity that would be as fulfilling or inspiring.

SAVE THE DATE:

March 9th 12:00 – 12:30 p.m. M.T. on Teams Employee Healthy Teaching Kitchen Cooking Class

Hey there Boise VA Employees,

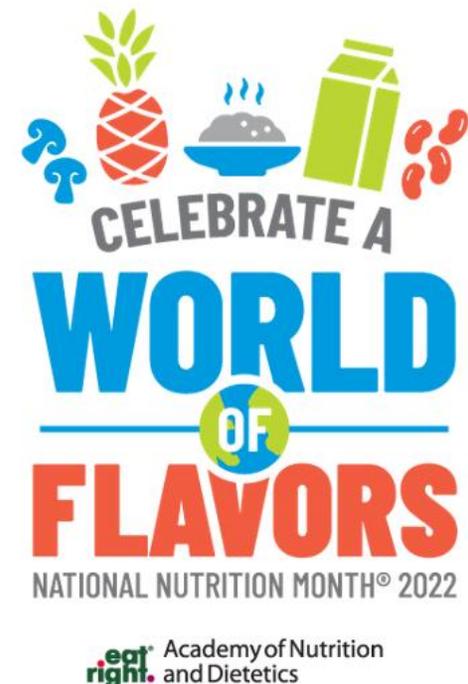
Are you interested in learning more about healthy cooking choices?

Come celebrate a world of flavors with us for National Nutrition Month in March as we make hummus and veggie wraps!

In fact, **March 9th is also Registered Dietitian Nutritionist Day!** Join us for a great time, with a mindful moment and learning delicious recipes.

Want the Teams invite? Reach out to Jeanette Berry or the link is on the [Employee Whole Health SharePoint site](#), along with the recipes for this month.

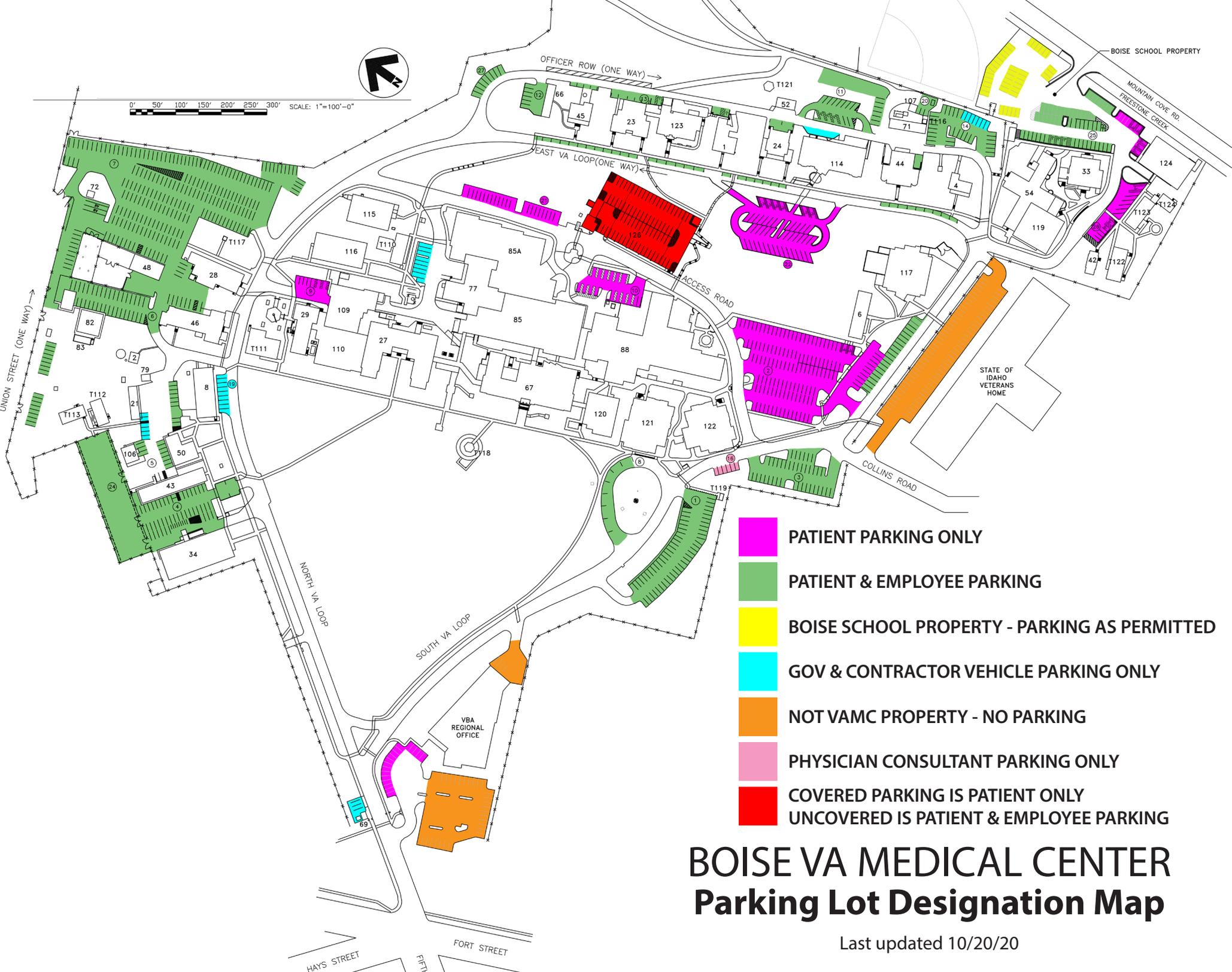
If you miss the call, we'll have the recording on the Employee Whole Health SharePoint.





**SOFTBALL SEASON HAS STARTED
PLEASE DO NOT PARK IN THE SOFTBALL
PARKING LOT IN MTN. COVE AFTER 3PM
BETWEEN NOW AND JUNE**

- THANKS



BOISE VA MEDICAL CENTER Parking Lot Designation Map

Last updated 10/20/20

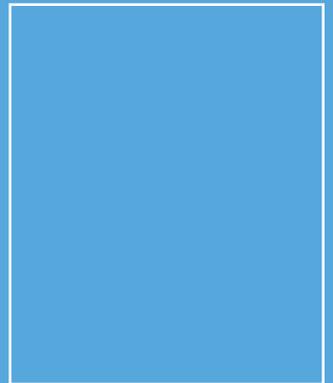
EMPLOYEES OF THE MONTH **JANUARY**



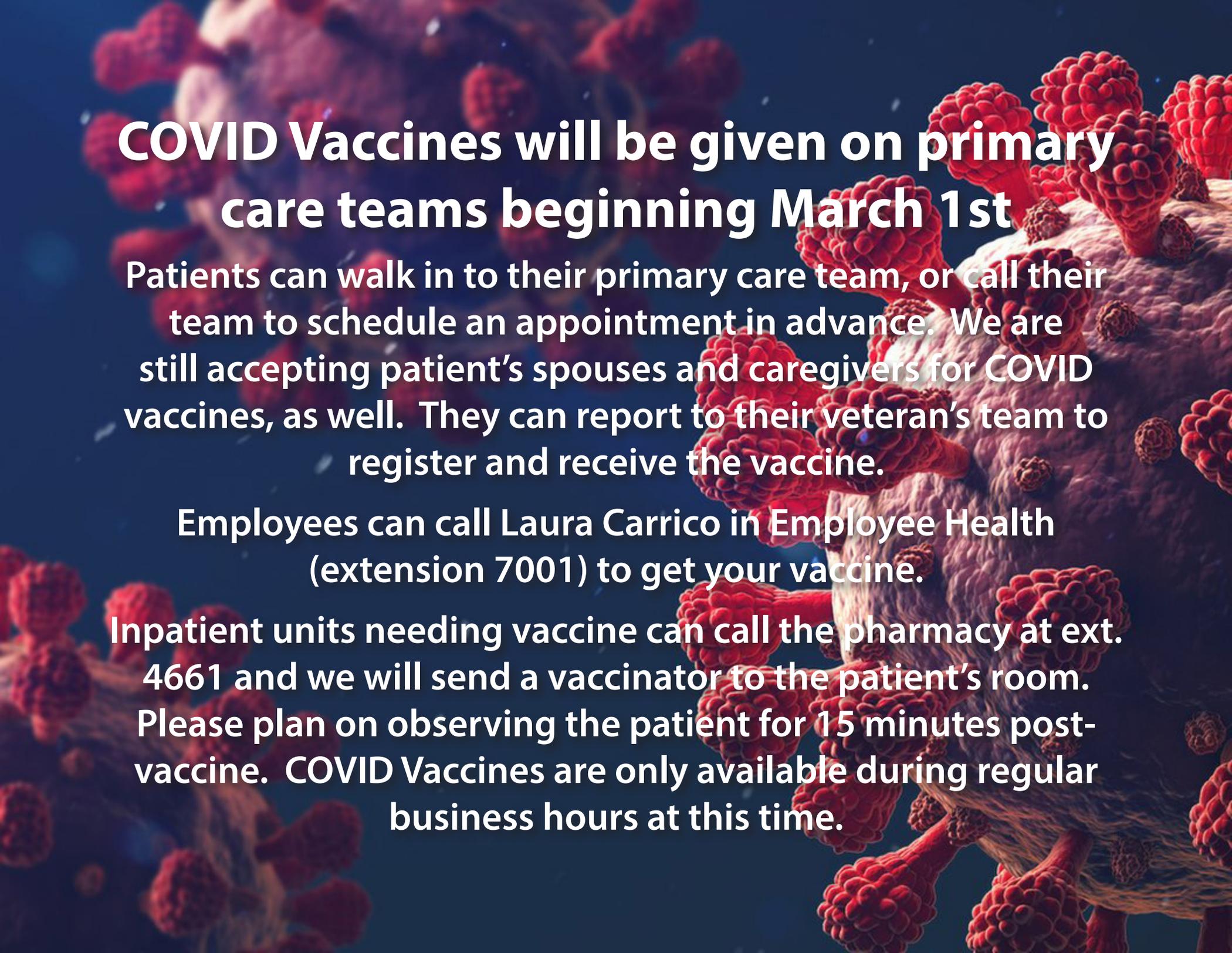
David Nick

“Integrity- Dave’s commitment to bringing outside imaging into the VA for critical patient care is unfounded. Always there and always available is just part of Dave’s great integrity. Commitment- Following protocol and staying committed allow Veterans to receive the care they need in a timely fashion. Hey Dave I need this study from St Elsewhere today. NO PROBLEM Advocacy- Dave is a Veteran and understands how important his job is related to the care of Veterans. Respect- Dave willingly misses a break or a lunch time to cover for his fellow employees when we are short staffed or otherwise needed. Excellence- The most incredible thing is Dave has strived do his job the right way, through all the changes and challenges that health care requires. Just recently Dave was able to acquire a study from an outside institution for a Veteran whose appointment was less than an hour away. Little credit is given to those who work behind the scenes. A simple thank you happens a lot for Dave that witness but his willingness to get the job done goes far above the simple thank you gestures. Everyone at the Boise VA should know David Nick for without him your daily efforts would be much more challenging!!”

Burhan is the epitome of Excellence. In my entire 20 year career in Nursing I have never been as impressed by an individual’s work ethic as I am of Burhan. During this pandemic with the ICU full and most everyone on isolation, Burhan has been omnipresent. He is able to move from one request to another fluidly and with each request is able to anticipate the needs for every intervention. His professionalism is second to none. He is courteous and always striving to provide the highest quality of care to our veteran population. He is respectful and cares very deeply about the care he provides. He is a quick study and has learned the needs of his fellow co-workers as to always stay one step ahead. When everyone else is ready to take a break, he is restocking and making sure that we are ready to tackle the next set of interventions and cares. He remains positive and always arrives with a smile to care for our patients regardless of the situation. I feel blessed to be able to work alongside such a reliable individual. He makes our work easier even on the worst and most stressful of days. Whenever he is working, I know it will be a good day. His steadfast positivity lifts us all!



Burhan Said



COVID Vaccines will be given on primary care teams beginning March 1st

Patients can walk in to their primary care team, or call their team to schedule an appointment in advance. We are still accepting patient's spouses and caregivers for COVID vaccines, as well. They can report to their veteran's team to register and receive the vaccine.

Employees can call Laura Carrico in Employee Health (extension 7001) to get your vaccine.

Inpatient units needing vaccine can call the pharmacy at ext. 4661 and we will send a vaccinator to the patient's room. Please plan on observing the patient for 15 minutes post-vaccine. COVID Vaccines are only available during regular business hours at this time.